Fire Prevention and Control

Incident Safety Officer - Application

PLEASE PRINT OR TYPE																	
NAME (LAST, FIRST, MI)					STUDENT TRAINING ID NUMBER DA								ATE OF BIRTH				
				N ₁	Y_{\perp}	ı	ı	ı	ı	ı	.			ı		1	
HOME ADDRESS (STREET, PO BOX)	DAYT	DAYTIME PHONE															
				()											
CITY	STATE		NIGHTTIME PHONE														
DATE OF APPLICATION DATE OF A	DDOINTME	NT	FIDE DEDARTA	PARTMENT NAME									FIRE DEPARTMENT CODE				
DATE OF APPLICATION DATE OF A	PPOINTME	:IN I	FIRE DEPARTM	/IENT NAN	TE.							FIF	ie Dep	ARTIVIE	- INT C	ODE	
_ , ,					· .								<u> </u>				
To facilitate your application, pl	ease in	ciuae	copies of a	ny cert	TICATE	es to	r co	urs	es ta	aken	witn	in the	ıast	SIX	mor	itns.	
Completion date of New York	State co	ourses	s:														
1. Incident Safety Officer (314	13)																
2. Principles of Building Cons	truction	n: Co	mbustible (3103)	or Bu	ıildi	ng C	on	stru	ction	for						
Fire Suppression Forces: Pr							_										
2 Deinciples of Building Cons	tmiation	Na		Ja (210)4) as												
Principles of Building Cons Building Construction for F							ام مم	d									
Fire Resistive Construction	_	pressi	ion Poices.	Nonce	mou	SHU	ic an	u									
The Resistive Constitution	(NFA)																
4. Hazardous Materials First R	Respond	ler Op	perations (3	1 or 25	31)												
5. Firefighter Assist and Searc	h Team	ı (FAS	ST) (88 or 2	2588)													
-																	
Note: For equivalent course ne content, hours and completion			•						-				tatio	n of	coi	urse	
I affirm that I have completed t	the cour	rses as	s shown.														
RETURN TO:																	
Standards Unit				SIG	NATURE										DATE		
NYS DHSES Office of Fire Prevention and	1 Contr	nl .															
1220 Washington Avenue	a Contin	JI															
Building 7A, Floor 2																	
Albany NY 12226																	
(518) 474-6746																	